

Is there anything else I can do to protect myself and my family from meningococcal meningitis/septicaemia?

Ensure family members are up to date with their routine vaccines. This can be discussed with your GP or Health visitor. Our routine childhood vaccination schedule includes protection against several kinds of meningitis bacteria. Depending on the age of an individual this may include vaccination against meningitis B and C (babies and infants) and for teenagers, a vaccine which protects against meningitis types A,C,W and Y. If you or your family member has had meningococcal meningitis/septicaemia, you may require an additional vaccine, which one of the Nurses/Doctors from the Public Health Protection Unit will arrange for you.

Smoking damages the protective tissues at the back of the nose and throat, which may make a person more vulnerable to this (and other) bacteria causing invasive infection. Stopping smoking may provide protection for yourself and family members.

More information is available at:

<https://www.nhs.uk/conditions/Meningitis/>
<https://www.meningitis.org/>
<https://www.meningitisnow.org/>
<http://www.nhs.org.uk>

You are welcome to contact the Nursing/Medical team at the Public Health Protection Unit

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Meningococcal Meningitis and Septicaemia

Information leaflet

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What is meningitis?

Meningitis is inflammation (swelling) of the outer covering of the brain. There are different kinds of meningitis caused by different types of germs. Some of the germs are called bacteria and some are called viruses

What is Septicaemia?

Septicemia is a serious bloodstream infection. It's also known as bacteraemia, or blood poisoning. Septicaemia occurs when a bacterial infection elsewhere in the body, such as in the lungs or skin, enters the bloodstream

What is meningococcal meningitis?

Meningococcal illness is caused by specific bacteria named *neisseria meningitidis*. *Meningococci* cause a form of meningitis along with other problems including septicaemia. This is the most common form of bacterial meningitis in all age groups. It is an extremely serious infection and can produce very rapid illness.

What is meningococcal septicaemia?

Meningococcal septicaemia is an acute (sudden onset) infection of the bloodstream and subsequent inflammation of the blood vessels with the bacteria *Neisseria meningitidis*. *Neisseria meningitidis* frequently lives in the upper respiratory tract with no evidence of illness.

What is the difference between bacterial and viral meningitis?

Viral meningitis is normally less serious than bacterial meningitis. Viral meningitis is more common and is usually followed by a full recovery though tiredness and depression may persist for some time. **Antibiotics are not necessary for viral meningitis.**

Bacterial meningitis is relatively rare, but it can be extremely serious. Most people with bacterial meningitis will respond when treated quickly with antibiotics

Where do the meningococcal bacteria come from?

Around 10% of our population carry the bacteria in the back of their nose and throat without it doing any harm at all. For reasons that are still not well understood, the bacteria will sometimes manage to spread from the throat into the bloodstream causing septicaemia (blood poisoning) and /or to the brain causing meningitis (inflammation of the tissues which protect the brain and spinal cord).

How is the meningococcal bacteria passed from person to person?

Through droplets which are produced from the nose/throat through coughs, sneezes and saliva. People who live in the same household or who have had intimate contact with a person (e.g. boy/girlfriend) who has meningococcal meningitis/septicaemia are at increased risk of becoming unwell and will be contacted by Public Health and offered advice and an antibiotic if required.

Who is at risk of meningococcal meningitis?

It most commonly affects babies, children and young adults, though persons of any age can be affected.

What are the symptoms of meningococcal meningitis?

In the first instance it is very like getting 'flu or any other acute infection - the person feels generally unwell; then they develop a high temperature. They usually have a severe headache or shy away from bright lights. They may develop a stiff neck, back and joint pain, feel sleepy, vomit or become confused. Two thirds of people also develop a rash of red and purple spots or bruises anywhere on the body. This rash does not disappear when pressed with an object such as a glass.

The symptoms may not all appear at the same time, they may be different in young babies.

Babies with meningitis can be very difficult to wake up, have a staring expression and a fever. They may refuse feeds or vomit or they may be distressed and make a shrill or moaning cry when you pick them up. The skin may be pale and blotchy and there may also be a rash of red and purple spots or bruises anywhere on the body.

What are the symptoms of meningococcal septicaemia?

Septicaemia (blood poisoning) occurs when the bacteria enter the bloodstream and multiply rapidly. Septicaemia can develop quickly: a rash appears under the skin, which begins as a cluster of tiny blood spots, which look like pinpricks. These spots may then develop and look like fresh bruises with obvious bleeding under the skin. The rash can be anywhere on the body - even behind the ears or on the soles of the feet. It will be more difficult to see the rash on people with dark skin. The spots or bruises do not turn white when they are pressed with a glass. If this type of rash is present get medical help **immediately.**

Should everyone who has been in contact with a meningococcal case receive antibiotics?

No. The only persons at risk are the members of the same family living in the same house and intimate "kissing" contacts (boy/girlfriend of case). They are the only people who need antibiotics. School friends and workmates are rarely at higher risk and do not normally need antibiotics. The Public Health Protection Unit will organise advice and antibiotics for those who need them.

Can people who have had antibiotics still get the disease?

Yes. Although antibiotics reduce the chances of infection they do not prevent it altogether, hence continued vigilance for signs and symptoms is important. You should contact your GP immediately if you develop any symptoms suggestive of meningitis/septicaemia.